

STATE TRAUMA ADVISORY BOARD
MINUTES
January 20, 2005
150 North 18th Avenue, Conference Room 540-A

Members Present:

Ben Bobrow (Chairman)	Charles Frank Allen
Stewart Hamilton	David Leinenveber
Steve Thompson	Philip Johnson
Scott Petersen	Mark Venuti
Jeff Farkas	David Bank
Bill Ashland	Rich Thacher
Stuart Alt	

Members Absent:

Peter Hershfield
Debbie Johnston
Anslem Roanhorse
Dan Judkins
Alex Wilcox
John Porter

I. CALL TO ORDER

Ben Bobrow, Chairman, called the regular meeting of the State Trauma Advisory Board to order at 9:10 a.m. A quorum was present.

II. DISCUSSION and Action November 4, 2004 MINUTES

A motion was made by Stewart Hamilton and seconded by Stuart Alt to approve the November 4, 2004 minutes with no corrections. **Motion carried.**

III. REPORTS

A. Report from the Office of the Director

- Niki O’Keeffe, Deputy Assistant Director reported:
 - Funding that goes through the Bureau to fund poison centers has been cut. The poison centers are working on this issue.
 - The Department is in the final stage of the interview process in hiring a Bureau Chief for the Bureau of Emergency Medical Services (BEMS).
- Proposition 200 - Dona Markley stated that State Trauma Advisory Board (STAB) requested that this matter be placed on the agenda. At this time, the Department is not aware of any impact Proposition 200 will have on Arizona EMS and Trauma Services.
- Dona Markley has moved to the Director’s Office - any questions for the Bureau should go to Niki O’Keeffe or Vicki Conditt.
- Dona Markley introduced Ron Anderson as the new Certification and Enforcement Manager for the Bureau of Emergency Medical Services (BEMS).

B. Chairman’s Report

- Ben Bobrow, Medical Director of the Bureau announced that:
 - STAB currently has no vacancies on the Board.
 - There are three new members of STAB: Philip Johnson, MD, David Leinenveber, and Anslem Roanhorse. He introduced the new members to the Board.

C. Public Health Statistics – Trauma Registry Report

- Georgia Yee, Office Chief, Office of Health Registries, reported:
 - The Trauma Users Group was held on December 16, 2004.

- All members present decided that both the conversion of the data items and the updating of the picklists be performed.
- To date the listing of the data items and the picklists have been distributed to each hospital.
- Each hospital has been asked to compare their picklists to what we have at the State Trauma Registry.
- Once the comparisons are received, we will start conversions and we will remap their current values to the new values.
- These will then be sent back to the hospital for final approval, before submitting to the software vendors.
- Vendor conversions will take an estimated two months to complete.
- This is the first step towards standardization.
- After this process is complete, the data can be analyzed.
- A database inventory showed that there are currently 106,600 total trauma case records.
 - Thirty-eight thousand records are on diskettes and CDs that have not been imported in the trauma database.
 - The hospital's assessments reflect that we do not match what is in the database.
 - After the conversion, each hospital's data will replace what is currently in our database.
 - Conducted a three-day Trauma One software training course.
 - Seven Hospitals attended
 - Five Hospitals are currently using Trauma One
 - The two new hospitals that are wanting to join are:
Sierra Vista Regional Health Centers and
Whiteriver Indian Health Services
Hospital
- Once all the modifications are complete, they will begin data collection.
- The data that has not been imported will not be useful until all the conversions are done.
- There are a total of ten hospitals in the Trauma Registry but only nine hospitals are currently active participants.
- Since the entire database has not been corrected, there are still issues to address.
- Those hospitals that are currently reporting are either ALS base hospitals or they are defined as trauma centers based on the statutory definition.
Also, add any other hospitals that do not meet that definition that choose to be designated.
- Every hospital that is required to report is reporting.

A question was asked as to the plan for smaller rural hospitals that cannot pay for the trauma software, and how many licenses may be provided per year to get new hospitals participating? Vicki Conditt stated that a survey would be sent to each hospital to get a better idea of how many hospitals intend to become designated. ADHS can then look at the budget to determine financial assistance.

IV. ARIZONA DEPARTMENT OF HEALTH SERVICES

A. Discussion on Open Meeting Laws and Public Meetings

- Dona Markley reported on changes in the Arizona Open Meeting Laws:
 - A quorum, unless otherwise defined in statute, is a simple majority of the total membership. There is legislation pending that will modify quorum requirements (SB 1162). This senate bill will change the statute to be a majority of filled positions for the three statutory committees.
 - A “Call to the Public” is only for the use of the public (audience).
 - “Training or Education Announcements” has been changed to “Summary of Current Events.” It is an open call to STAB Members only. STAB members shall not take any action on matters raised at this time.
 - There will no longer be sign-in sheets at the meetings. Only members will be listed on the minutes. Public and employee names will no longer be listed on the minutes.

B. Discussion on Status of Prior STAB Recommendations to ADHS

- Dona Markley reported the actions taken by ADHS regarding the changes in the Arizona Trauma Patient Identification & Field Triage Decision Standard made at the November 4, 2004 meeting.

C. Report on Cardiac Arrest, AED, and Acute Stroke Data Collection Initiative

- Ben Bobrow reported that Arizona Department of Health, Bureau of Emergency Medical Services, has established a registry to collect and analyze data pertaining to out-of-hospital cardiac arrest (OHCA). The program has been titled: Save Hearts in Arizona Registry and Education (SHARE).
 - A packet containing a draft letter to EMS providers regarding the SHARE Program and data forms was distributed at the meeting
 - The goal is to create a quantifiable report for the Director
 - You can reach the SHARE website link through the BEMS website
 - Soon there will be a direct website called www@az.share.gov
 - The goal is to have a web-based database
 - Lani Clark from the University of Arizona has been contracted to assist with this project
 - By law we should report use of AEDs within 5 days
 - We would be the only state that has a cardiac arrest registry
- Related recommendations that were made in the meeting included:
 - The ability to e-mail or download data
 - Break down question #3 on the EMS Data Form – Ventilations and Compressions?

D. Report on Status of Arizona Certified EMT-Paramedics Working in Health Care Institutions

- The Department has taken this under consideration and in reviewing the request has determined that the role of paramedics in settings other than a prehospital environment requires input from other licensing entities. A change of scope of practice would require a revision of rule and possible statutory changes. The priorities for the Bureau for 2005 have already been set. After the trauma rules and air ambulance rules have been completed, ADHS will consider engaging stakeholders to determine if there is widespread support for such a change in scope of practice.

E. Report on Status of EMS Futures Forum

- EMS Council's Executive Committee has requested that the Bureau of EMS hold an EMS Futures Forum in 2005. The Department has reviewed the request and determined that such Forums are most effective if held every five to seven years. The Department is in the process of working on some of the key initiatives from the Forum held in December 2003. The Bureau remains committed to work collaboratively with the EMS and Trauma Community. The Bureau intends to actively participate in activities and meetings sponsored by the regional EMS Councils and community organizations.
- Bob Bobrow, Medical Director for the Bureau, presented Dona Markley with a plaque for all her good work that she has done for the Bureau. Dona Markley will be moving to the Director's Office as Manager of the Office of Strategic Planning.

V. OLD BUSINESS

A. Discussion and Action on Status of Trauma Center Designation Rulemaking and Legislation

- Vicki Conditt stated that it is critical to the trauma center designation and rulemaking process that proposed legislation, SB 1134 passes
- Vicki Conditt and Sarah Harpring presented information and discussed the draft rules at the recent EMS Regional Council Meetings:
 - Northern Arizona Emergency Medical Services Council scheduled for January 7, 2005 was canceled due to weather conditions.
 - Western Arizona Council of Emergency Medical Services Meeting - January 13, 2005
 - Arizona Emergency Medical Services Council Meeting - January 19, 2005
 - Southeastern Arizona Emergency Medical Services Council Meeting - January 25, 2005
- The latest revision of the draft rules on Trauma Center Designation is dated November 16, 2004 and is on the ADHS website @ www.azdhs.gov/diro/admin_rules/draft.htm.
- ADHS scheduled a public meeting for January 27, 2005 to obtain oral comment on the draft rules.
- The draft rules have been very well received.

- The statute does not require that designation be based solely on the American College of Surgeons (ACS).
- A question was raised as to what could be done for the rural areas. The intent is to have the rural areas involved with the trauma system. Discussion ensued regarding the uniform billing code UB92. There is an activation charge, code 06X under the UB92 that is now permissible. If this code is billed, it can result in increased compensation for trauma center activations. Individual hospitals will need to pursue this.

B. Discussion and Action on Trauma Data Collection Initiative –

- Dona Markley distributed copies of the Arizona Health Status and Vital Statistics 2003 Annual Report. STAB was asked to review the data in the agenda packet and the 2003 Annual Report and to determine what other data should be collected.

VI. NEW BUSINESS

Report on Status of Community and Hospital Preparedness Program's Regional Planning

- Jane Wixted reported on the National Hospital Preparedness Program Grant: (please see attached copy).
 - The major focus of the grant is the development of regional surge capacity.
 - We are working with hospitals that are interested in providing a multiple patient environment.
 - Chemical antidotes have been placed at hospitals throughout the state.
 - The goal is to continue to provide decontamination and personal protective equipment for the hospitals.
 - The Phoenix area did receive funds to purchase ventilators.
- It was recommended that training given to hospitals also be provided to dispatch centers.

VII. CALL TO THE PUBLIC

No one came forward.

VIII. SUMMARY OF CURRENT EVENTS

A CDC Grant for tribal and motor vehicle crash prevention has been awarded to four different tribes. Three of the tribes are located in Arizona. White Mountain Apache, Tohona O'odham, and Navaho Nation.

X. NEXT MEETING

The next regular STAB meeting is April 21, 2005.

XI. ADJOURNMENT

The meeting adjourned at 10:40 a.m.

Approved by: State Trauma Advisory Board - April 21, 2005